Approved for use through 7/31/2006. OMB 0651-0031

Misook Yu

Examiner

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Reperwork Reduction Act of 1995, no persons are required to respond to a collection of	f information unless it displays a valid OMB control number		
PENDAL OR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)		
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	5028CIP		
(rees pursuant to the Consolidated Appropriations Act, 2005 (n.k. 4616).)			
Application Number 10/017,327	Filed December 6, 2001		
For COMPOUNDS FOR THERAPY AND DIAGNOSIS AND METHOD	FOR USING SAME		

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified

The requested exte	ension and fee are as follows (check time pe	eriod desired and o	enter the appropriate fee below)	:
		Fee	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
. \square	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
\boxtimes	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ <u>1020</u>
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
☐ A check in t☐ Payment by☐ The Directo☐ The Directo☐ Deposit Accumant Acc	aims small entity status. See 37 CFR of the amount of the fee is enclosed. It credit card. Form PTO-2038 is attach or has already been authorized to charge is hereby authorized to charge any ferount Number 07-1074. I have enclose of formation on this form may become public original authorized to credit card information and author ovide credit card information and author	ed. e fees in this appearance es which may be ed a duplicate co lic. Credit card i	e required, or credit any over py of this sheet. nformation should not be incl	payment, to
I am the	□ applicant/inventor. □ assignee of record of the entire in Statement under 37 CFR 3.73 □ attorney or agent of record. Reging attorney or agent under 37 CFR 1 Registration number if acting under 37	(b) is enclosed. stration Number 1.34.	(Form PTO/SB/96).	

Signature 508-270-2499 Typed or printed name Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of forms are submitted.

Art Unit

1642

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETEDFORMS TO THIS ADDRESS. SEND

TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04 P)
Approved for use through 07/31/2006. OMB 0651-0032/
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Effective on 12/08 Eees pursuant to the Consolidated Approp		3).	Complete if Known				
	•		Application Number 10/017,327				
for FY 2005		Filing D	ate	December 6, 2001			
		First Na	amed Inventor	NICOLETTE			
Applicant claims small entity st	atus. See 37 CFR 1.27	Examin	Examiner Name Misook Yu				
	(4) 4 000	Art Unit	Art Unit 1642				
TOTAL AMOUNT OF PAYMENT (\$) 1,020		Attorne	Attorney Docket No. 5028CIP				
METHOD OF PAYMENT (check	all that apply)						
☐ Check ☐ Credit Card ☐ M	loney Order 🔲 None [Other (please identify	y) :			
Deposit Account Deposit Account	unt Number: 07-1074		Deposit Acco	ount Name: GENZYM	IE CORPO	RATION	
For the above-identified de	posit account, the Director	r is hereby	authorized to:	(check all that apply)			
Charge fee(s) indica	ited below		☐ Char	ge fee(s) indicated be	elow, excep	t for the filing fee	
	al fee(s) or underpayment	ts of fee(s)	🛛 Cred	lit any overpayments			
Under 37 CFR 1.16 WARNING: Information on this form ma		d information	n should not b	e included on this form	n. Provide cr	edit card	
information and authorization on PTO-2							
FEE CALCULATION		-					
1. BASIC FILING, SEARCH, A				5V 4 4411 4 71	011 FFF0		
FILING	S FEES Small Entity	SEARCH	Small Entit	EXAMINATION Sm:	ON FEES	·	
Application Type Fee (\$)		Fee(\$)	Fee(\$)		ee(\$)	Fees Paid (\$)	
Utility 300	150	500	250	200 1	00		
Design 200	100	100	50	130	65		
Plant 200	100	300	150	160	80		
Reissue 300	150	500	250	600 3	00		
Provisional 200	100	0	0	0	0		
2. EXCESS CLAIM FEES	•					Small Entity	
Fee Description					Fee (\$)	Fee (\$)	
Each claim over 20 (including Re					50	25	
Each independent claim over 3 (i Multiple dependent claims	ncluding Reissues)				200 360	100 180 *	
	Claims Fee(\$)	Fee	Paid (\$)			Dependent Claims	
20 or HP=	_ x	=			Fee (\$)) <u>Fee</u> \Paid (\$)	
HP = highest number of total claims	paid for, if greater than 20.						
Indep. Claims Extra	Claims Fee(\$)	Fee	Paid (\$)				
3 or HP=	_ x	= _					
HP = highest number of independer	nt claims paid for, if greater tha	an 3.					
3. APPLICATION SIZE FEE		. (1 4'	14	61-1			
If the specification and drawings e listings under 37 CFR 1.52						150	
sheets or fraction thereof.	See 35 U.S.C. 41(a)(1)(G) and 37 CI	FR 1.16(s).	i sinan chiriy) for cac	ii additiona	1 30	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 3-mo extension of time 1020							
SUBMITTED BY	(x ()						
Signature	nafeet	-A	Registration No. (Attorney/Agent)	54,498	Telephone	e 508-270-2499	
Name (Print/Type) Jennifer D. Tousig	nant	77-7	(Virolina), wildair()	;	Date	7/22/05	
() () () () () () () () () ()	· · · · ·						

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.